# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC	
	C C00484642
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Blueprint Interactive	M M / D D / Y Y Y Y Y
Mailing Address 1155 Connecticut Ave NW	10 24 2016 Amount
Ste 601	
City State Zip Code	60824.00
Washington DC 20036-4306	Transaction ID: VN7GBA69Y49  Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising - Estimate  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
Ayotte, Kelly, , ,	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	orsement For: Primary   General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Blueprint Interactive	10 24 Y 2016
Mailing Address 1155 Connecticut Ave NW	10 24 2016
Ste 601	Amount
City State Zip Code	19450.86
Washington DC 20036-4306	Transaction ID: VN7GBA69Y57 Date of Disbursement or Obligation
Purpose of Expenditure  Online Advertising Fedinate  Category/	Date of Disbursement of Obligation
Online Advertising - Estimate	
Name of Federal Candidate Support Office	e Sought: House District:
Heck, Joe, , ,	President Senate State: NV
Calendar Year-To-Date Disbu	ursement For: Primary X General
Per Election for Office Sought 5028643.93 2016	
(a) SUBTOTAL of Itemized Independent Expenditures	80274.86
(-)	00274.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Lambe, Rebecca, , ,  [Electronically Filed] Date	0 25 2016
Signature	

Schedule E)	LIVI LXI LIVI	DITOTILO		PAGE 2 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Senate Majority PAC			C	C00484642
Check if 24-hour report 48-hour report	X New re	eport Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee Blueprint Interactive			M = M	c Distribution/Dissemination
Mailing Address 1155 Connecticut Ave NW			10	24 2016
Ste 601				
City	State	Zip Code		1763.00
Washington	DC	20036-4306		ID: VN7GBA69Y65 ursement or Obligation
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M	/ D = D / Y = Y = Y
Name of Federal Candidate		Support	Office Sought:	House District:
Heck, Joe, , ,		<b>X</b> Oppose	President	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		5028643.93	Disbursement For: 2016 Other (s	Primary <b>✗</b> General pecify) ▶
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
Blueprint Interactive			10	24 2016
Mailing Address 1155 Connecticut Ave NW			Amount	
Ste 601			7 HIIOGIN	
City	State	Zip Code		1214.55
Washington	DC	20036-4306		D: VN7GBA69Y73 ursement or Obligation
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M	/ D D / Y Y Y Y
Name of Federal Candidate		<b>x</b> Support	Office Sought:	House District:
Masto, Catherine, Cortez, ,		Oppose	President	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	1.7.1.1.7	5028643.93	Disbursement For: 2016 Other (s	Primary <b>X</b> General pecify) ▶
(a) SUBTOTAL of Itemized Independent Expend	itures		. •	2977.55
(b) SUBTOTAL of Unitemized Independent Expe	enditures			
			4	45
(c) TOTAL Independent Expenditures			<b>&gt;</b>	7
Under penalty of perjury I certify that the independent, or at the request or suggestion of, any can party committee) any political party committee or	didate or authoriz			
Lambe, Rebecca, , ,	[Electro	onically Filed] Date	9 10 25	2016
olynature				

Schedule E)	IN EXILITE	ATOTILO		PAGE 3 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Senate Majority PAC			C	C00484642
Check if 24-hour report 48-hour report	X New re	port Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee Blueprint Interactive			Date of Pub	lic Distribution/Dissemination
Mailing Address 1155 Connecticut Ave NW			10	24 2016
Ste 601			Amount	
City	State	Zip Code		19450.86
Washington	DC	20036-4306		ID: VN7GBA69Y81 pursement or Obligation
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M	/ D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Trump, Donald, J., ,		<b>X</b> Oppose	<b>✗</b> President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		1549078.40	Disbursement For: 2016 Other (s	Primary <b>x</b> General specify) ▶
Full Name of Payee			Date of Pub	olic Distribution/Dissemination
Chambers Lopez Strategies			10	24 2016
Mailing Address PO Box 5539			Amount	
City	State	Zip Code		4158.52
Arlington	VA	22205-0039		ID: VN7GBA69Y23 bursement or Obligation
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M	/ D D / Y D Y D
Name of Federal Candidate		Support	Office Sought:	House District:
Heck, Joe, , ,		<b>x</b> Oppose	President	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		5028643.93	Disbursement For: 2016 Other (s	Primary <b>X</b> General specify) ▶
(a) SUBTOTAL of Itemized Independent Expendit	tures			23609.38
				4
(b) SUBTOTAL of Unitemized Independent Exper	nditures		• •	4
(c) TOTAL Independent Expenditures			·	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any canon party committee) any political party committee or	lidate or authorize			
Lambe, Rebecca, , ,	[Electro	nically Filed] Date	9 10 25	2016
2. <del>3</del>				

Schedule E)	JEINI EXI ENE	ATTOTILES		PAGE 4 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Senate Majority PAC			C	C00484642
Check if 24-hour report 48-hour report	New re	port Amends repo	rt filed on	D   D   /   Y     Y     Y     Y
Full Name of Payee			Date of Public	Distribution/Dissemination
Chambers Lopez Strategies			10	24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 5539			Amount	
City	State	Zip Code		4158.52
Arlington	VA	22205-0039		D: VN7GBA69Y31 rsement or Obligation
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M /	D   D / Y   Y   Y   Y
Name of Federal Candidate		Support	Office Sought:	House District:
Trump, Donald, J., ,		<b>X</b> Oppose	<b>✗</b> President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		1549078.40	Disbursement For: 2016 Other (spe	Primary <b>X</b> General ecify) ▶
Full Name of Payee			Date of Public	Distribution/Dissemination
Precision Network, LLC			10	24 / 2016
Mailing Address 1140 Connecticut Ave NW			Amount	
Ste 800				
City Washington	State DC	Zip Code 20036-4010		10857.14 : VN7GBA69Y99
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	Date of Disbu	rsement or Obligation
Name of Federal Candidate		Support	Office Sought:	House District:
Blunt, Roy, , ,		<b>x</b> Oppose	President X	Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		140229.01	Disbursement For: 2016 Other (spe	Primary <b>✗</b> General ecify) ▶
(a) SUBTOTAL of Itemized Independent Exper	nditures		. •	15015.66
(b) SUBTOTAL of Unitemized Independent Ex	penditures		· •	7
(c) TOTAL Independent Expenditures			<b>•</b>	7 7
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any caparty committee) any political party committee	andidate or authorize			
Lambe, Rebecca, , ,	[Electro	nically Filed] Date	10 / 25	2016
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Schedule E)	NOENT EXICIO	TIONES		PAGE 5 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDE	ENTIFICATION NUMBER ▼
Senate Majority PAC			C	00484642
Check if 24-hour report 48-hour rep	port New rep	port Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	Distribution/Dissemination
Precision Network, LLC			10	24 / 2016
Mailing Address 1140 Connecticut Ave NW			Amount	
Ste 800				
City	State DC	Zip Code	Transaction ID	11250.00 D: VN7GBA69YA7
Washington	DC	20036-4010		sement or Obligation
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M /	D    D    /    Y    Y    Y    Y    Y
Name of Federal Candidate		Support	Office Sought:	House District:
Blunt, Roy, , ,		X Oppose	President <b>X</b>	Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		140229.01	Disbursement For: [2016 Other (spe	Primary <b>X</b> General
Full Name of Payee				Distribution/Dissemination
Precision Network, LLC			10 Bate of Fabric	24 2016
Mailing Address 1140 Connecticut Ave N	W			
Ste 800			Amount	
City	State	Zip Code		34286.67
Washington	DC	20036-4010		: VN7GBA69YB4 sement or Obligation
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M /	D D / Y T Y T Y
Name of Federal Candidate		Support	Office Sought:	House District:
Toomey, Patrick, J., ,		<b>X</b> Oppose	President <b>X</b>	Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7 7	17575945.53	Disbursement For: 2016 Other (spe	Primary <b>X</b> General ecify) ▶
(a) SUBTOTAL of Itemized Independent Ex	nenditures			45536.67
(a) CODIONIZ OF NOMIZOG Macepointonic Exc	portanaroo		7	45550.07
(b) SUBTOTAL of Unitemized Independent	Expenditures		<b>•</b>	7
(c) TOTAL Independent Expenditures			•	77
Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorize			
Lambe, Rebecca, , ,	[Electron	nically Filed] Date	10 25	2016
Signature				

Schedule E)	PENT EXTERE	TIONES	PAGE FOR S	6 OF 7 SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFI	CATION NUMBER ▼
Senate Majority PAC			C C00484	642
Check if 24-hour report 48-hour report	<b>✗</b> New rep	port Amends repo	rt filed on	) / Y = Y = Y
Full Name of Payee			Date of Public Distrib	ution/Dissemination
Precision Network, LLC			M 10 / 24	
Mailing Address 1140 Connecticut Ave NW			Amount	
Ste 800	2			
City	State DC	Zip Code	Transaction ID : VN7	3142.86
Washington		20036-4010	Date of Disbursemen	
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M / D = 1	/
Name of Federal Candidate		<b>x</b> Support	Office Sought: Hous	se District:
McGinty, Kathleen, A., ,		Oppose	President X Sena	ate State: PA
Calendar Year-To-Date Per Election for Office Sought		17575945.53	2016	imary <b>X</b> General
			Other (specify)	
Full Name of Payee Precision Network, LLC			Date of Public Distrib	D / Y = Y = Y
Mailing Address 1140 Connecticut Ave NW				
Ste 800			Amount	
City	State	Zip Code		34286.67
Washington	DC	20036-4010	Transaction ID : VN70 Date of Disbursemen	
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M = M / D =	D / Y = Y = Y
Name of Federal Candidate		Support	Office Sought: Hous	se District:
Toomey, Patrick, J., ,		<b>x</b> Oppose	President X Sena	ate State: PA
Calendar Year-To-Date Per Election for Office Sought		17575945.53	Disbursement For: Pr 2016 Other (specify)	General
(a) SUBTOTAL of Itemized Independent Expen	ditures		<b>)</b>	37429.53
(b) SUBTOTAL of Unitemized Independent Exp	enditures		<b>•</b>	7
(c) TOTAL Independent Expenditures			<b>•</b>	7
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorize			
Lambe, Rebecca, , ,	[Electron	nically Filed] Date	10 25 Y	2016
S.griataro				

Schedule E)	PAGE 7 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC	C C00484642
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	ate of Public Distribution/Dissemination
Precision Network, LLC	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1140 Connecticut Ave NW Ste 800	mount
	2000.00
	3000.00 ransaction ID : VN7GBA69YE8
Purpose of Expenditure Online Advertising - Estimate  Category/ Type	ate of Disbursement or Obligation
Name of Federal Candidate	
McGipty Kathleen A	esident
	esident
Calendar Year-To-Date Per Election for Office Sought  17575945.53  Disburse 2016	Other (specify)
Full Name of Payee	Pate of Public Distribution/Dissemination
Mailing Address	M M / D D / Y Y Y Y
	mount
City State Zip Code	
D	Pate of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office So	ought: House District:
Oppose Pri	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	ement For: Primary General
	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	3000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	207843.65
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Lambe, Rebecca, , ,  [Electronically Filed] Date 10	25 2016
o.g. island	